

AO 240 (Rev. 10/03)

UNITED STATES DISTRICT COURT
RECEIVED

Middle

District of Alabama

2006 DEC 28 P 3:44

Plaintiff

DEBRA P. HACKETT, CLK
U.S. DISTRICT COURT
MIDDLE DISTRICT ALAAPPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

V.

CASE NUMBER:

1:06CV1152-MEF

Defendant

I, Tony Maurice Jackson declare that I am the (check appropriate box)☒ Petitioner/plaintiff/movant☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration Houston County Jail

Are you employed at the institution? No Do you receive any payment from the institution? No

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. 9-22-06 Last date of employment
\$215.00 Last take-home 9-4-06 thru 9-18-06 Last Pay Period

THOP 2810 Ross Clark Circle Dothan, AL 36302

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|------------------------------|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

AO 240 Reverse (Rev. 10/03)

4. Do you have **any** cash or checking or savings accounts? ☒ Yes ☐ No

If "Yes," state the total amount. \$ 5.00

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☐ Yes ☒ No

If "Yes," describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

Lydia Danielle Jackson (Wife) 50%
Jaquavion Keshad Deonté Jackson (Son) 50%
Tony Maurice Jackson Jr. (Son) 50%

I declare under penalty of perjury that the above information is true and correct.

12-26-06

Date



Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

State of Alabama
Unified Judicial SystemForm C-10
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Rev. 2/95

**AFFIDAVIT OF SUBSTANTIAL
HARDSHIP AND ORDER**

Case Number

1:06CV1152-MEF

IN THE United States District COURT OF Middle, ALABAMA
(Circuit, District, or Municipality) (Name of County or Municipality)STYLE OF CASE: Tony Maurice Jackson v. State of Alabama
Plaintiff(s) Defendant(s)TYPE OF PROCEEDING: Civil CHARGE(s) (if applicable):

- ☒ **CIVIL CASE--** I, because of substantial hardship, am unable to pay the docket fee and service fees in this case. I request that payment of these fees be waived initially and taxed as costs at the conclusion of the case.
- ☐ **CIVIL CASE--** (such as paternity, support, termination of parental rights, dependency) - I am financially unable to hire an attorney and I request that the court appoint one for me.
- ☐ **CRIMINAL CASE--** I am financially unable to hire an attorney and request that the court appoint one for me.
- ☐ **DELINQUENCY/NEED OF SUPERVISION--** I am financially unable to hire an attorney and request that the court appoint one for my child/me.

AFFIDAVIT**SECTION I.****1. IDENTIFICATION**Full name Tony Maurice Jackson Date of birth 7-30-81

Spouse's full name (if married)

Complete home address 1415 Third Ave. Dothan, AL. 36301Number of people living in household 3Home telephone number (334) 792-7211Occupation/Job Cook Length of employment 10 monthsDriver's license number None *Social Security Number 421-11-2115Employer I HOP Employer's telephone number (334) 794-5712Employer's address 2810 Ross Clark Circle Dothan, AL. 36302**2. ASSISTANCE BENEFITS**

Do you or anyone residing in your household receive benefits from any of the following sources? (If so, please check those which apply.)

☐ AFDC ☐ Food Stamps ☐ SSI ☐ Medicaid ☐ Other**3. INCOME/EXPENSE STATEMENT****Monthly Gross Income:**Monthly Gross Income \$ 500.00

Spouse's Monthly Gross Income (unless a marital offense)

Other Earnings: Commissions, Bonuses, Interest Income, etc.

Contributions from Other People Living in Household

Unemployment/Workmen's Compensation,

Social Security, Retirements, etc.

Other Income (be specific)

TOTAL MONTHLY GROSS INCOME\$ 500.00**Monthly Expenses:****A. Living Expenses**Rent/Mortgage \$ 200.00Total Utilities: Gas, Electricity, Water, etc. 100.00Food 100.00

Clothing

Health Care/Medical

Insurance

Car Payment(s)/Transportation Expenses

Loan Payment(s)

*OPTIONAL

SCANNED
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AFFIDAVIT OF SUBSTANTIAL HARDSHIP AND ORDER

Monthly Expenses: (cont'd page 1)

Credit Card Payment(s) _____

Educational/Employment Expenses _____

Other Expenses (be specific) _____

Sub-Total

A \$ 400.00

B. Child Support Payment(s)/Alimony

\$ N/A

Sub-Total

B \$ _____

C. Exceptional Expenses

\$ N/A

TOTAL MONTHLY EXPENSES (add subtotals from A & B monthly only)

\$ 400.00

Total Gross Monthly Income Less total monthly expenses:

DISPOSABLE MONTHLY INCOME

\$ 100.00

4. LIQUID ASSETS:

Cash on Hand/Bank (or otherwise available such as stocks, bonds, certificates of deposit)

\$ _____

Equity in Real Estate (value of property less what you owe)

Equity in Personal Property, etc. (such as the value of motor vehicles, stereo, VCR, furnishing, jewelry, tools, guns, less what you owe)

Other (be specific)

Do you own anything else of value? ☐ Yes ☐ No

(land, house, boat, TV, stereo, jewelry)

If so, describe _____

TOTAL LIQUID ASSETS

\$ 0


5. Affidavit/Request

I swear or affirm that the answers are true and reflect my current financial status. I understand that a false statement or answer to any question in the affidavit may subject me to the penalties of perjury. I authorize the court or its authorized representative to obtain records of information pertaining to my financial status from any source in order to verify information provided by me. I further understand and acknowledge that, if the court appoints an attorney to represent me, the court may require me to pay all or part of the fees and expenses of my court-appointed counsel.

Sworn to and subscribed before me this

_____ day of _____, 19____.

Judge/Clerk/Notary


 Affiant's Signature

 Tony Jackson
 Print or Type Name

ORDER OF COURT

SECTION II.

IT IS THEREFORE, ORDERED, AND ADJUDGED BY THE COURT AS FOLLOWS:

☐ Affiant is not indigent and request is DENIED.
☐ Affiant is partially indigent and able to contribute monetarily toward his/her defense; therefore defendant is ordered to pay \$ _____ toward the anticipated cost of appointed counsel. Said amount is to be paid to the clerk of court or as otherwise ordered and disbursed as follows: _____
☐ Affiant is indigent and request is GRANTED.☐ The prepayment of docket fees is waived.

IT IS FURTHER ORDERED AND ADJUDGED that _____, is hereby appointed as counsel to represent affiant.

IT IS FURTHER ORDERED AND ADJUDGED that the court reserves the right and may order reimbursement of attorney's fees and expenses, approved by the court and paid to the appointed counsel, and costs of court.

Done this _____ day of _____, 19____.

Judge

HOUSTON COUNTY JAIL

Resident Account Summary

Monday, December 25, 2006 @09:37

For CIN: 54566 JACKSON, TONY MAURICE

Date	Transaction Description	Amount	Balance	Owed	Held	Reference
12/17/2006	<MEDCO> TYL	-0.50	0.05	0.00	0.00	
12/17/2006	MEDCO TYL	0.50	0.55	0.50	0.00	
12/17/2006	<MEDCO> TYL	-0.50	0.55	0.00	0.00	
12/17/2006	MEDCO TYL	0.50	1.05	0.50	0.00	
12/16/2006	<MEDCO> ANT	-0.50	1.05	0.00	0.00	
12/16/2006	MEDCO ANT	0.50	1.55	0.50	0.00	
12/13/2006	EPR OID:100041203-ComisaryPur	-17.95	1.55	0.00	0.00	
12/10/2006	<MEDCO> ANT	-0.50	19.50	0.00	0.00	
12/10/2006	MEDCO ANT	0.50	20.00	0.50	0.00	
12/05/2006	<MEDCO> Payment for MEDCO on 2006	-5.00	20.00	0.00	0.00	
12/05/2006	DEPMO 4942060284	25.00	25.00	5.00	0.00	
11/29/2006	MEDCO COLD PACK110706	5.00	0.00	5.00	0.00	
11/29/2006	EPR OID:100040969-ComisaryPur	-9.00	0.00	0.00	0.00	
11/20/2006	EPR OID:100040762-ComisaryPur	-10.00	9.00	0.00	0.00	
11/20/2006	<MEDCO> Payment for MEDCO on 2006	-0.50	19.00	0.00	0.00	
11/20/2006	<MEDCO> Payment for MEDCO on 2006	-0.50	19.50	0.50	0.00	
11/20/2006	DEPMO 109644799	20.00	20.00	1.00	0.00	
11/10/2006	MEDCO ANT	0.50	0.00	1.00	0.00	
11/10/2006	MEDCO ANT	0.50	0.00	0.50	0.00	
11/10/2006	<MEDCO> ANT	-0.50	0.00	0.00	0.00	
11/10/2006	MEDCO ANT	0.50	0.50	0.50	0.00	
10/31/2006	EPR OID:100040208-ComisaryPur	-34.50	0.50	0.00	0.00	
10/28/2006	<MEDCO> Payment for MEDCO on 2004	-15.00	35.00	0.00	0.00	
10/28/2006	DEPMO 84940807	50.00	50.00	15.00	0.00	
10/27/2006	DEPCASH INITIAL DEPOSIT - REINSTA	0.00	0.00	15.00	0.00	
10/22/2004	MEDCO CRNP AND GENTAK 101304	15.00	0.00	15.00	0.00	
09/25/2004	DEPCASH INITIAL DEPOSIT	0.00	0.00	0.00	0.00	

IN THE UNITED STATES DISTRICT COURT FOR THE
MIDDLE DISTRICT OF ALABAMA

DIVISION

2006 DEC 28 A 10:07

Tony Maurice Jackson

Plaintiff(s)

v.

State of AlabamaJudge Denny HollowayDoug A. Valeska D.A.

Defendant(s)

MOTION TO PROCEED IN FORMA PAUPERISPlaintiff(s) Tony Maurice Jackson

moves this Honorable Court for an order allowing her/him to proceed in this case without prepayment of fees, costs, or security therefor, and for grounds therefor submits the attached sworn affidavit in support of the motion.


Plaintiff(s) signature